

# Notice of Effective Tax Rate

## Property Tax Rates in \_\_\_\_\_

(insert year)

(insert taxing unit name)

This notice concerns \_\_\_\_\_ property tax rates for \_\_\_\_\_  
(insert year) (insert taxing unit name)

It presents information about three tax rates. Last year's tax rate is the actual rate the taxing unit used to determine property taxes last year. This year's *effective* tax rate would impose the same total taxes as last year if you compare properties taxed in both years. This year's *rollback* tax rate is the highest tax rate the taxing unit can set before taxpayers can start tax rollback procedures. In each case these rates are found by dividing the total amount of taxes by the tax base (the total value of taxable property) with adjustments as required by state law. The rates are given per \$100 of property value.

### Last year's tax rate:

Last year's operating taxes ..... \$ \_\_\_\_\_  
Last year's debt taxes ..... \$ \_\_\_\_\_  
Last year's total taxes ..... \$ \_\_\_\_\_  
Last year's tax base ..... \$ \_\_\_\_\_  
Last year's total tax rate ..... \$ \_\_\_\_\_/\$100

### This year's effective tax rate:

Last year's adjusted taxes (after subtracting taxes on lost property) ..... \$ \_\_\_\_\_  
÷ This year's adjusted tax base (after subtracting value of new property) .... \$ \_\_\_\_\_  
= This year's effective tax rate  
(Maximum rate unless taxing unit publishes notices and holds hearings.) \$ \_\_\_\_\_/\$100

*In the first year a hospital district collects the additional sales tax to reduce property taxes, it must insert the following lines unless its first adjustment was made last year:*

– Sales tax adjustment rate ..... \$ \_\_\_\_\_/\$100  
= Effective tax rate ..... \$ \_\_\_\_\_/\$100

### This year's rollback tax rate:

Last year's adjusted operating taxes  
(after subtracting taxes on lost property and adjusting for any  
transferred function, tax increment financing, state criminal justice  
mandate, and/or enhanced indigent health care expenditures) ..... \$ \_\_\_\_\_  
÷ This year's adjusted tax base ..... \$ \_\_\_\_\_  
= This year's effective operating rate ..... \$ \_\_\_\_\_/\$100  
x 1.08 = this year's maximum operating rate ..... \$ \_\_\_\_\_/\$100  
+ This year's debt rate ..... \$ \_\_\_\_\_/\$100  
= This year's total rollback rate ..... \$ \_\_\_\_\_/\$100

*A hospital district that collects the additional sales tax to reduce property taxes, including one that collects the tax for the first time this year, must insert the following lines:*

– Sales tax adjustment rate ..... \$ \_\_\_\_\_/\$100  
= Rollback tax rate ..... \$ \_\_\_\_\_/\$100

*For a taxing unit with additional rollback rate for pollution control, insert the following lines:*

+ Additional rollback rate for pollution control ..... \$ \_\_\_\_\_/\$100  
= Rollback tax rate ..... \$ \_\_\_\_\_/\$100

# Statement of Increase/Decrease

If \_\_\_\_\_ adopts a \_\_\_\_\_ tax rate equal to the effective tax rate of \$ \_\_\_\_\_ per  
(name of taxing unit) (current year) (unit's effective tax rate)

\$100 of value, taxes would \_\_\_\_\_ compared to \_\_\_\_\_ taxes by \$ \_\_\_\_\_.  
(increase or decrease) (previous year) (amount of increase or decrease)

## Schedule A – Unencumbered Fund Balances

The following estimated balances will be left in the taxing unit's property tax accounts at the end of the fiscal year. These balances are not encumbered by a corresponding debt obligation.

Type of Property Tax Fund	Balance
	\$ _____

## Schedule B – Current Year Debt Service

The taxing unit plans to pay the following amounts for long-term debts that are secured by property taxes. These amounts will be paid from property tax revenues (or additional sales tax revenues, if applicable).

Description of Debt	Principal or Contract Payment To Be Paid From Property Taxes	Interest To Be Paid From Property Taxes	Other Amounts To Be Paid	Total Payment
	\$ _____	\$ _____	\$ _____	\$ _____

(expand as needed)

Total required for \_\_\_\_\_ debt service. . . . . \$ \_\_\_\_\_  
(current year)

– Amount (if any) paid from funds listed in Schedule A . . . . . \$ \_\_\_\_\_

– Amount (if any) paid from other resources. . . . . \$ \_\_\_\_\_

– Excess collections last year. . . . . \$ \_\_\_\_\_

= Total to be paid from taxes in \_\_\_\_\_ . . . . . \$ \_\_\_\_\_  
(current year)

+ Amount added in anticipation that the taxing unit will collect

only \_\_\_\_\_ % of its taxes in \_\_\_\_\_ . . . . . \$ \_\_\_\_\_  
(current year)

= Total Debt Levy . . . . . \$ \_\_\_\_\_

## Schedule C – Expected Revenue from Additional Sales Tax

(For hospital districts with additional sales tax to reduce property taxes)

In calculating its effective and rollback tax rates, the taxing unit estimated that it will receive \$ \_\_\_\_\_ in additional sales and use tax revenues.

## Schedule D – Transfer of Department, Function or Activity

The \_\_\_\_\_ spent \$ \_\_\_\_\_ from \_\_\_\_\_ to  
(name of taxing unit discontinuing the function) (amount spent in the preceding 12 months before the rate calculations) (beginning date)

\_\_\_\_\_ on the \_\_\_\_\_. The \_\_\_\_\_  
(ending date) (name of discontinuing function) (name of taxing unit receiving the function)

operates this function in all or a majority of the \_\_\_\_\_.  
(name of taxing unit discontinuing the function)

[Second Year of Transfer: Modify schedule to show comparison of amount this year and preceding year by taxing unit receiving the function.]

## Statement of Increase/Decrease *(continued)*

### Schedule E – Enhanced Indigent Health Care Expenditures

The \_\_\_\_\_ spent \$ \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
*(name of taxing unit) (amount) (beginning date)*

\_\_\_\_\_ on enhanced indigent health care at the increased minimum eligibility standards, less the amount of state assistance.  
*(ending date)*

For the current tax year, the amount of increase above last year's enhanced indigent health care expenditures is \$ \_\_\_\_\_.  
*(amount of increase)*

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This notice contains a summary of actual effective and rollback tax rates' calculations.  
You can inspect a copy of the full calculations at:

Insert address \_\_\_\_\_

Name of person  
preparing this notice \_\_\_\_\_

Title \_\_\_\_\_

Date prepared \_\_\_\_\_